

SECRET
(When Filled In)

VOUCHER NO. 7-12		REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. 7-12				
TO : Finance Division, Accounts Branch THROUGH: Monetary Branch												DIVISION VOUCHER NO. <i>17 Aug. 61</i>				
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																
SUBJECT <i>Eastman Kodak Company</i>										INVOICE NO(S). <i>31 and 32</i>						
PAYMENT TO <i>\$ 2,310.83</i>										CONTRACT NO. <i>HI-CJ-2219</i>						
AMOUNT <i>\$ 2,310.83</i>										CHECK TO BE DATED <i>22 August 1961</i>						
CASH PAYMENT		<input checked="" type="checkbox"/> U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK										
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ <i>\$ 2,310.83</i> SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ <i>\$ 2,310.83</i> OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																
DATE	SIGNATURE OF PAYEE			DATE	SIGNATURE OF AGENT			DATE			SIGNATURE OF RECIPIENT					
DESCRIPTION-ALL OTHER ACCOUNTS 13-33				34-39 STATION CODE	40-42 EXPEND CODE	43 F U N D S	48-46 PAY PER. LIQ. CODE	47-52 OBLIG. REF. NO.	53 CA YR	54-57 GENERAL LEDGER ACCT. NO.	58-67 ALLOT. OR COST ACCT. NO.			68-70 DUE DATE	71-80 AMOUNT	
DESCRIPTION- ADVANCE ACCOUNTS 13-27				P.O. NO.	PROJ. NO.								OBJEC T CLASS	DEBIT	CREDIT	
<i>EASTMAN KODAK CO</i>																
<i>" " "</i>																
Test: <i>orig - 1 - Address Contract AF-CJ-2219 (Part) 1 - Voucher</i>																
PRE		DATE <i>17 Aug 61</i>	AUTHORIZED CERTIFYING OFFICER <i>JAB</i>			DATE <i>17 Aug 61</i>	TOTALS <i>\$ 2,310.83</i>	\$ <i>2,310.83</i>								
25X1-																

PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

D. O. VOU. NO. _____

Use continuation sheet(s) if necessary

BU. VOU. NO. _____

Page 1 of 1

PAID BY

U. S. _____
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

Payee's Account No. _____ Discount Terms _____

TO _____ Eastman Kodak Company
(Payee)
Rochester 4, New York
(Address)

No. and Date of Order	Date of Delivery or Service	Date to	Req. No.	Weight	Date	Invoice Rec'd.	Govt. B/L No.
ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)				Quantity	UNIT PRICE		AMOUNT
					Cost	Per	*
			Inv. Nos.				
			31 original Enviro attached				\$ 1,339.58
			32 "	"	"	"	971.25
					TOTAL		\$ 2,310.83

PAYMENT:	(PAYEE MUST NOT USE THIS SPACE)		
COMPLETE <input type="checkbox"/>	DIFFERENCES _____ STAT _____		
PARTIAL <input type="checkbox"/>	_____		
FINAL <input type="checkbox"/>	_____		
PROGRESS <input type="checkbox"/>	_____		
ADVANCE <input type="checkbox"/>	Amount verified; cc <input type="checkbox"/> 0.83		
Approved for _____ = \$ _____ By _____ Title _____	nt. <i>17 Aug 61</i> (Date) g Officer)		
Exchange rate _____ = \$1.00			
THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE			
ACCOUNTING CLASSIFICATION (Appropriation Sym			
STAT-			

aid by { Check No. _____ on Treasurer of the United States
Check No. _____ on _____ (Name of Bank)
Cash, \$ _____, on _____, 19 _____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and enter his official title.

Per _____

Title _____

Standard Form No. 1034
GSA GEN. REG. NO. 27
1034-107-16

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

Use continuation sheet(s) if necessary

AMOUNT TO YOU. NO.
RDP 4229-C1

BU. VOL. NO. **31**

COPY / OF /

U. S. Government

PAID BY

Voucher prepared at **Rochester, New York** June 30, 1961
(Give place and date)

Payee's Account No. **Z-2053**

Discount Terms

TO **Eastman Kodak Company**
(Payee)

343 State Street Rochester 4, New York
(Address)

Contract No. **HF-CJ-2219**

Date **2/19/58**

Req. No.

Date

Invoice Rec'd.

Shipped from

to

Weight

Govt. B/L No.

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
	5/15/61 through 6/11/61	Reimbursable Costs Incurred				\$1,339.58
TOTAL						\$1,339.58

PAYMENT:

COMPLETE
PARTIAL
FINAL
PROGRESS
ADVANCE

(PAYEE MUST NOT USE THIS SPACE)

DIFFERENCES

Amount verified

1239.58

† Approved for = \$

Pursuant to authority vested in me, I certify that
this voucher is correct and proper for payment.

STAT

By _____

† (Authorized Certifying Officer)

(Date)

Title _____

Exchange Rate = \$1.00

- THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ on Treasurer of the United States
Check No. _____ on _____ (Name of Bank)

Cash, \$ _____, on _____, 19 _____ Payee

* When used in foreign countries, insert name of currency of country in which used.

If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____

Title _____

**Public Voucher for Purchases and
Services Other Than Personal**
CONTINUATION SHEET

U. S. Government

(Department, bureau, or establishment)

Sheet No. 1 of Bureau Voucher No. 31

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN-TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
5/15/61 through 6/11/61		<u>Labor Category</u>		Rate	Hours		Amount
		Engineer #2		\$14.82	17.0		
		" #3		11.40	69.5	\$251.94	
		" Shop		10.74	16.3	792.30	
		Laboratory Hand #2		10.71	2.5	175.06	
		Guard Time		7.42	5.5	26.78	
						40.81	
						\$1,286.89	
		Material-Subject to Mt'l. Hdlg. Expense Stores					
						\$3.00	
		Material-Not Subject to Mt'l. Hdlg. Exp. Petty Cash Purchases				45.00	
		Total Material					48.00
		<u>Material Handling Expense</u>					
		14.4% of \$3.00					4.3
		<u>G & A Expense</u>					
		8.8% of \$48.43					4.26
							\$1,339.58

DPD 4229-61
COPY / OF /

June 30, 1961

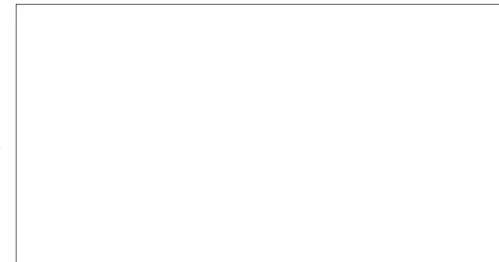
Dear Sir:

Under Contract HF-CJ-2219 we are submitting Bureau Voucher No. 31 in the amount of \$1,339.58 which represents reimbursable costs incurred during the period May 15, 1961 through June 11, 1961.

STAT

Enc.

cc - ELG
JLB



19. JUN 11 8 70

Standard Form No. 1034
7 GAO 5030
1034-107-16

**PUBLIC VOUCHER FOR PURCHASES
SERVICES OTHER THAN PERSONAL**

Use continuation sheet(s) if necessary

D. O. VOU. NO.

32

BU. VOU. NO.

U. S. Government

(Department, bureau, or establishment)

Voucher prepared at **Rochester, New York** August 2, 1961

(Give place and date)

Z-2043

Discount Terms

Payee's Account No.

Eastman Kodak Company

TO

(Payee)

343 State Street

Rochester 4, New York

(Address)

Contract No. **HF-CJ-2219**

Date **2/19/58**

Req. No.

Date

Invoice Rec'd.

Shipped from

to

Weight

Govt. B/L No.

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
	6/12/61 through 7/9/61	Reimbursable costs incurred				\$971.25
TOTAL						\$971.25

(PAYEE MUST NOT USE THIS SPACE)

PAYMENT:

COMPLETE

PARTIAL

FINAL

PROGRESS

ADVANCE

DIFFERENCES

Amount verified; cc

\$971.25

STAT

(Signature or Initials)

Approved for = \$

By _____

Title _____

Exchange Rate = \$1.00

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

† (Authorized Certifying Officer)

(Date)

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by } Check No. _____ on Treasurer of the United States
} Check No. _____ on _____ (Name of Bank)
Cash, \$ _____, on _____, 19 _____ Payee _____

* When used in foreign countries, insert name of currency or country in which used.
If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below
Approved for \$ _____, and over his official title.

Per _____

Title _____

Public Voucher for Purchases and Services Other Than Personal

CONTINUATION SHEET

Government

U. S. _____ Sheet No. 1 of Bureau Voucher No. 32
(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN-TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
6/12/61 through 7/9/61	Labor Category	Rate	Hours				
	Engineer #2	\$14.82	32.0			\$ 474.24	
	" #3	11.40	40.0			456.00	
	Guard Time	7.42	2.3			17.07	
						\$ 947.31	
	Material-Not subject to Mt'l. Hdlg. Expense						
	Stores	\$13.00					
	Petty Cash Purchases	9.00					
	Total Material					22.00	
	G & A Expense						
	8.8% of \$22.00					1.94	
						\$ 971.25	

DPD 4943-61
COPY / OF /

EB

3 August 1961

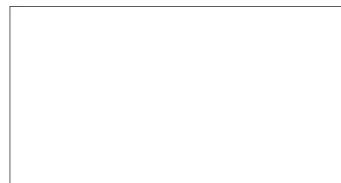
Dear Sir:

Under Contract HF-CJ-2219 we are submitting Bureau Voucher No. 32 in the amount of \$971.25 which represents reimbursable costs incurred during the period 12 June 1961 through 9 July 1961.

STAT

Enc.

cc - ELG
JLB



AUG 7 3 20 PM '61